|  |  |   |                      |                                       |               | -                |              |                  |                        |       |                     |                        |
|--|--|---|----------------------|---------------------------------------|---------------|------------------|--------------|------------------|------------------------|-------|---------------------|------------------------|
| _  |  |   |                      | · · · · · · · · · · · · · · · · · · · |               |                  |              | A                | oplication             | orDo  | ocket Num           | ber                    |
|  | DATENT /                                       | APPLICATIO                                | N EEE DI             | ETEDM                                 | IINI ATI      | ON RECO          | 30           |                  |                        | _     |                     |                        |
|  | PAIENIA  |   | ive Octob            |                                       |               |                  |              | 10.682,339       |                        |       |                     |                        |
|  |  | CLAIMS AS                                 | S FILED -<br>(Column |                                       | i<br>(Colu    | mn 2)            | SM.          | ALL EI           | NTITY                  | OR    | OTHER<br>SMALL      |                        |
| ΓC   | TAL CLAIMS                                     | 7   |                      |                                       |               | -                | F            | RATE             | FEE                    | 1     | RATE                | FEE                    |
| FOR  |  |   | NUMBER               | NUMBER FILED NUI                      |               | ER EXTRA         | ВА           | SIC FEE          | 385.00                 | OR    | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 7 min                | minus 20= *                           |               | Ø                | X\$ 9=       |                  |                        | OR    | X\$18=              |                        |
| ID   | EPENDENT CL                                    | AIMS                                      | ↓ mi                 | nus 3 =                               | *             | $\alpha$         |              | X43=             |                        | OR    | X86=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                      |                                       | •             |                  | +            | 145=             |                        | OR    | +290=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |                      |                                       |               |                  | L_T          | OTAL             | 385                    | OR    | TOTAL               |                        |
|  | С  | LAIMS AS A                                | MENDEC               | - PAR                                 | T II          |                  |              |                  |                        |       | OTHER               |                        |
|  |  | (Column 1)                                |                      | (Colur                                |               | (Column 3)       | S            | MALL             | ENTITY                 | OR    | SMALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUM<br>PREVIO<br>PAID         | BER<br>OUSLY  | PRESENT<br>EXTRA | F            | RATE             | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                | **                                    |               | =                | ×            | (\$ 9=           |                        | OR    | X\$18=              |                        |
|  | Independent                                    | *   | Minus                | ***                                   |               | =                | $\downarrow$ | <br><43=         |                        | OR    | X86=                |                        |
| :  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                      |                                       |               |                  | -            |                  |                        |       | .000                |                        |
|  |  | 1   |                      |                                       |               |                  | +            | 145=<br>TOTAL    |                        | OR    | +290=<br>TOTAL      |                        |
|  |  |   |                      |                                       |               |                  | ADD          | OIT. FEE         |                        | OR    | ADDIT. FEE          |                        |
|  |  | (Column 1)                                |                      | (Colur                                |               | (Column 3)       |              |                  |                        |       |                     |                        |
|  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUM<br>PREVIO<br>PAID         | BER<br>OUSLY  | PRESENT<br>EXTRA | F            | RATE             | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total  | *   | Minus                | **                                    |               | =                | X            | (\$ 9=           |                        | OR    | X\$18=              |                        |
|  | Independent                                    | *   | Minus ·              | ***                                   |               | =                | <b>一</b> 、   | (43=             | -                      |       | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                      |                                       |               |                  | <u> </u>     |                  |                        | OR    |                     |                        |
|  |  |   |                      | ,                                     |               |                  | +            | 145=             |                        | OR    | +290=               |                        |
|  |  |   |                      |                                       |               |                  | ADD          | TOTAL<br>IT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                |                      | (Colu                                 |               | (Column 3)       | ·            |                  |                        |       |                     |                        |
| MENDMENTC  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUM<br>PREVIO<br>PAID         | IBER<br>OUSLY | PRESENT<br>EXTRA | R            | RATE             | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                | **                                    |               | = .              | X            | (\$ 9=           |                        | OR    | X\$18=              |                        |
|  | Independent                                    | *   | Minus                | ***                                   |               | =                | X            | <br>(43=         |                        | OR    | X86=                |                        |
| •  |  |   |                      |                                       |               |                  |              |                  |                        | 11.77 |                     |                        |

|             |  | (Column 1)                       |       | (Column 2)                                  | (Column 3)       |  |  |  |  |  |
|-------------|--|----------------------------------|-------|---|------------------|--|--|--|--|--|
| AMENDMENT C |  | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |  |  |  |  |  |
| M           | Total  | *                                | Minus | **  | = .              |  |  |  |  |  |
| MEN         | Independent                                    | *                                | Minus | ***   | =                |  |  |  |  |  |
| Ā           | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |   |                  |  |  |  |  |  |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

OR

OR

+290=

TOTAL

+145=

ADDIT. FEE

TOTAL